

**UNITED STATES DISTRICT COURT
DISTRICT OF IDAHO**

Dear Prospective Juror:

Your name has been drawn by random selection, and you are being considered for jury service in the United States Court. Trial by jury is a keystone of our system of justice. Jury service is, therefore, an opportunity and an obligation for every American. Jurors will receive mileage and, unless you are a federal government employee, an attendance fee for each day of service.

In order for us to obtain some information about you from which we can objectively determine whether you are qualified to serve pursuant to federal law, please complete this questionnaire. You **must** answer every question, which a number 2 pencil, sign, date and **return the form within ten days**.

If you are unable to fill out this form, someone else may do it for you provided that person indicates in the "Remarks" section why it was necessary for him or her to do so instead of you.

If you do not return this questionnaire form, fully completed, within ten days you are liable to be summoned to report at your own expense for completion of the questionnaire in this office.

Do not attach anything to this form. Please write your comments on the "Remarks" section . **Do not ask to be excused by telephone.**

If your address changes after you have returned this questionnaire, please notify us promptly by letter or post card, addressing it to "Attention: Jury Administrator."

Privacy Act Statement: Your social security number is requested on a voluntary basis under authority of sections 6041 and 6109 of the Internal Revenue Code. If you earn more than \$600 in compensation as a juror, the court must inform the IRS using your social security number and it is helpful to get your number now. Failure to provide your social security number at this time will not disqualify you from serving as a juror, but it may delay jury service payments to which you become entitled.

NOTES REGARDING THE QUALIFICATION FORM

Question 3 - RESIDENCE: If you answered "NO", that your primary residence was not in the same state or county for the past year, name the other states and counties of primary residence and give dates.

Question 5 and 6 - CRIMINAL RECORD: If you answer to either question 5 or 6 is "YES", please show under "Remarks" the following: (a) date of the offense, (b) date of the conviction, (c), date of the offense, (d) the sentence imposed (if a conviction), and (e) name of the court. One is disqualified from jury service only for criminal offenses punishable by imprisonment for more than one year, but it is the maximum penalty, and not the actual sentence which controls this.

Question 8 - YOUR HEALTH: If you claim a mental or physical disability, please explain and/or enclose proof in a separate document. Do not attach to this form.

NOTE: →Do not ask the court to call your doctor. Any doctor's statement you obtain regarding your physical condition must be sent to the court by you rather than your doctor.

→If you have a physical handicap or disability that would prevent you from serving as a juror, and you are willing to serve if reasonable accommodation can be provided, please advise and explain by enclosing a separate unattached letter.

Question 10 - RACE: Federal law requires you as a prospective juror to indicate your race. This answer is required solely to avoid discrimination in juror selection, and has absolutely no bearing on qualifications for jury service. By answering this question, you help the federal court check and observe the juror selection process so that discrimination cannot occur. In this way, the federal court can fulfill the policy of the United States, which is to provide jurors who are randomly selected from a fair cross-section of the community.

Question 13 - OCCUPATION: Federal law requires that you answer this questions about your occupation so that the federal courts may determine promptly whether you fall within an excuse or exemption category (See Questions 9 and 15).

Question 15 - GROUNDS FOR EXCUSE: If one of the categories listed in Question 15 applies to you and you wish to be excused for that reason, fill in completely the circle for your category at Question 15. Please make sure you also give, under "Remarks", such information as may be requested within the excuse category. Other persons may be excused only by showing jury service would cause them undue hardship or extreme inconvenience. A request to be excused must be in writing. Do not ask to be excused by telephone.

Question 16 - YOUR SIGNATURE: Be sure you have signed the form. If another person filled out this questionnaire on your behalf, that person must also indicate name, address and reason why under "Remarks".

JUROR QUALIFICATION QUESTIONNAIRE Please read letter before completing questionnaire.					
IF ANOTHER PERSON COMPLETES THIS FORM, PLEASE INDICATE THAT IN THE REMARKS SECTION		YES	NO	13. OCCUPATION (SEE NOTES ON LETTER)	14. EDUCATION SHOW THE EXTENT OF YOUR EDUCATION ABOVE GRADE SCHOOL
1. ARE YOU A CITIZEN OF THE UNITED STATES?		<input type="radio"/>	<input type="radio"/>	ARE YOU NOW EMPLOYED? YES <input type="radio"/> NO <input type="radio"/>	YES <input type="radio"/> NO <input type="radio"/>
2. ARE YOU 18 YEARS OF AGE OR OLDER? DATE OF BIRTH: _____ AGE: _____ MONTH _____ DAY _____ YEAR _____		<input type="radio"/>	<input type="radio"/>	ARE YOU A SALARIED EMPLOYEE OF THE U.S. GOVT.? YES <input type="radio"/> NO <input type="radio"/>	HIGH SCHOOL/ GED <input type="radio"/> <input type="radio"/>
3. HAS YOUR PRIMARY RESIDENCE FOR THE PAST YEAR BEEN IN THIS STATE?		<input type="radio"/>	<input type="radio"/>	YOUR USUAL OCCUPATION, TRADE OR BUSINESS	TRADE or VOCATIONAL SCHOOL <input type="radio"/> <input type="radio"/>
IF "NO", SHOW UNDER REMARKS THE NAMES OF OTHER COUNTIES OR STATES DURING THE PAST YEAR		<input type="radio"/>	<input type="radio"/>	YOUR EMPLOYER'S NAME	ABOVE HIGH SCHOOL <input type="radio"/> <input type="radio"/>
IN THE SAME COUNTY?		<input type="radio"/>	<input type="radio"/>	BUSINESS OR EMPLOYER'S ADDRESS:	
4. DO YOU READ, WRITE, SPEAK AND UNDERSTAND THE ENGLISH LANGUAGE?		<input type="radio"/>	<input type="radio"/>	15. GROUNDS FOR REQUESTING EXCUSE	
IF YOUR ANSWER TO 5,6, or 7 IS "YES"	5. ARE ANY CHARGES NOW PENDING AGAINST YOU FOR A VIOLATION OF STATE OR FEDERAL LAW PUNISHABLE BY IMPRISONMENT FOR MORE THAN ONE YEAR?	YES <input type="radio"/>	NO <input type="radio"/>	THIS SECTION DESCRIBES CERTAIN CATEGORIES OF PERSONS WHO MAY BE EXCUSED FROM SERVICE AS A JUROR. IF YOU ARE A PERSON IN ONE OF THESE CATEGORIES AND YOU WISH TO BE EXCUSED, FILL IN THE CIRCLE COMPLETELY FOR THE NUMBER OF YOUR CATEGORY.	
PLEASE SEE NOTES ON LETTER.	6. HAVE YOU EVER BEEN CONVICTED, EITHER BY YOUR GUILTY OR NOLO CONTENDRE PLEA, OR BY A COURT OR JURY TRIAL, OF A STATE OF FEDERAL CRIME FOR WHICH PUNISHMENT COULD HAVE BEEN MORE THAN ONE YEAR IN PRISON?	<input type="radio"/>	<input type="radio"/>	OR, IF YOU WISH TO SERVE, DO NOT SHOW ANYTHING HERE.	
	7. (IF "YES") WERE YOUR CIVIL RIGHTS RESTORED? EXPLAIN IN "REMARKS".	<input type="radio"/>	<input type="radio"/>	PERSONS SHOWING A CATEGORY OF EXCUSE MUST PROVIDE EXPLANATION IN REMARKS SECTION.	
8. DO YOU HAVE ANY PHYSICAL OR MENTAL DISABILITY THAT WOULD INTERFERE WITH OR PREVENT YOU FROM SERVING AS A JUROR?		YES <input type="radio"/>	NO <input type="radio"/>	1. Person over 70 years of age. <input type="radio"/>	
(IF "YES", PLEASE SEE NOTES ON LETTER.)		<input type="radio"/>	<input type="radio"/>	2. Persons who have served as a grand or petit juror in the state of federal court within the past two (2) years. <input type="radio"/>	
9. EXEMPTIONS:				3. Persons having active care and custody of a child or children under 10 years of age whose health and/or safety would be jeopardized by their absence for jury service; or <input type="radio"/>	
ARE YOU EMPLOYED ON A FULL TIME BASIS AS:		YES <input type="radio"/>	NO <input type="radio"/>	4. a person who is essential to the care of aged or infirmed persons. <input type="radio"/>	
A PUBLIC OFFICIAL OF THE UNITED STATES, STATE, OR LOCAL GOVERNMENT WHO IS ELECTED TO PUBLIC OFFICE OR DIRECTLY APPOINTED BY ONE ELECTED TO OFFICE?		<input type="radio"/>	<input type="radio"/>	5. Undue hardship or extreme inconvenience, great distance from place of holding court, grave illness/emergency in family, severe economic hardship to employer, situations where a trial or grand jury proceeding may require more than 30 days of service. <input type="radio"/>	
A MEMBER OF ANY GOVERNMENT POLICE OR REGULAR FIRE DEPARTMENT (NOT INCLUDING VOLUNTEER OR NON-GOVERNMENTAL DEPARTMENTS) ?		<input type="radio"/>	<input type="radio"/>	6. Volunteer safety personnel such as fire fighters or members of a rescue squad or ambulance crew for a public safety agency. <input type="radio"/>	
A MEMBER IN ACTIVE SERVICE OF THE ARMED FORCES OF THE UNITED STATES?		<input type="radio"/>	<input type="radio"/>		
10. RACE: FILL IN THE CIRCLE COMPLETELY WHICH BEST DESCRIBES YOUR RACE (SEE NOTE IN LETTER). TO ASSIST IN ENSURING THAT ALL PEOPLE ARE REPRESENTED ON JURIES, PLEASE INDICATE WHICH OF THE FOLLOWING APPLIES TO YOU. NOTHING YOU DISCLOSE WILL AFFECT YOUR SELECTION FOR JURY SERVICE.				REMARKS	
<input type="radio"/> -BLACK <input type="radio"/> -ASIAN <input type="radio"/> -NATIVE AMERICAN INDIAN					
<input type="radio"/> -WHITE <input type="radio"/> -OTHER (SPECIFY) _____					
11. ARE YOU HISPANIC?		YES <input type="radio"/>	NO <input type="radio"/>		
16. I declare under penalty of perjury that all answers are true to the best of my knowledge and belief.					
<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Widowed <input type="radio"/> Separated or Divorced					
SIGN HERE ' _____				SOCIAL SECURITY NUMBER: _____ - _____ - _____	
				DATE: _____	